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CONFIRMATION NO. 3321

SERIAL NUMBER 10/603,724	FILING OR 371(c) DATE 06/24/2003 RULE	CLASS 463	GROUP ART UNIT 3713	ATTORNEY DOCKET NO. 60027.0198US01/BS# 030101										
APPLICANTS Dave Anderson, Lawrenceville, GA; Senis Busayapongchai, Tucker, GA;														
** CONTINUING DATA *****														
** FOREIGN APPLICATIONS *****														
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 09/10/2003														
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 45%; border-bottom: 1px solid black; vertical-align: bottom;"> Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged </td> <td style="width: 15%; border-bottom: 1px solid black; vertical-align: bottom; text-align: center;"> STATE OR COUNTRY GA </td> <td style="width: 10%; border-bottom: 1px solid black; vertical-align: bottom; text-align: center;"> SHEETS DRAWING 4 </td> <td style="width: 10%; border-bottom: 1px solid black; vertical-align: bottom; text-align: center;"> TOTAL CLAIMS 24 </td> <td style="width: 20%; border-bottom: 1px solid black; vertical-align: bottom; text-align: center;"> INDEPENDENT CLAIMS 4 </td> </tr> <tr> <td style="border-bottom: 1px solid black; vertical-align: bottom;"> <div style="display: flex; justify-content: space-between;"> <div> Examiner's Signature </div> <div> Initials </div> </div> </td> <td colspan="4"></td> </tr> </table>					Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged	STATE OR COUNTRY GA	SHEETS DRAWING 4	TOTAL CLAIMS 24	INDEPENDENT CLAIMS 4	<div style="display: flex; justify-content: space-between;"> <div> Examiner's Signature </div> <div> Initials </div> </div>				
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<div style="display: flex; justify-content: space-between;"> <div> Examiner's Signature </div> <div> Initials </div> </div>														
ADDRESS 39262														
TITLE Methods and systems for establishing games with automation using verbal communication														
FILING FEE RECEIVED 906	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<table style="width: 100%; border-collapse: collapse;"> <tr><td><input type="checkbox"/> All Fees</td></tr> <tr><td><input type="checkbox"/> 1.16 Fees (Filing)</td></tr> <tr><td><input type="checkbox"/> 1.17 Fees (Processing Ext. of time)</td></tr> <tr><td><input type="checkbox"/> 1.18 Fees (Issue)</td></tr> <tr><td><input type="checkbox"/> Other _____</td></tr> <tr><td><input type="checkbox"/> Credit</td></tr> </table>			<input type="checkbox"/> All Fees	<input type="checkbox"/> 1.16 Fees (Filing)	<input type="checkbox"/> 1.17 Fees (Processing Ext. of time)	<input type="checkbox"/> 1.18 Fees (Issue)	<input type="checkbox"/> Other _____	<input type="checkbox"/> Credit				
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